

From 1 November 2023, longer MBS-funded Level C and D telephone calls will be available where the patient is registered under MyMedicare with the billing practice, and triple bulk billing incentives for the longer MBS telehealth services for children under 16, pension, and concession card holders.

| Level C items   |  |
|---|--|
| 91900   | Phone attendance by a general practitioner lasting at least 20 minutes           |
| 91903   | Phone attendance by a medical practitioner 25 - 45 minutes                       |
| 91906   | Phone attendance by a medical practitioner, in an eligible area, 25 - 45 minutes |
| Level D items   |  |
| 91910   | Phone attendance by a general practitioner, lasting at least 40 minutes          |
| 91913   | Phone attendance by a medical practitioner 45 - 60 minutes                       |
| 91916   | Phone attendance by a medical practitioner, in an eligible area, 45 - 60 minutes |
| Triple bulk bill incentive items                          |  |
| <i>Note: MM – Modified Monash locality classification</i> |  |
| 75880   | Bulk bill incentive MM1  |
| 75881   | Bulk bill incentive MM2  |
| 75882   | Bulk bill incentive MM3-4  |
| 75883   | Bulk bill incentive MM5  |
| 75884   | Bulk bill incentive MM6  |
| 75885   | Bulk bill incentive MM7  |



## Frequently asked questions

### Who can access the new MBS Levels C and D telehealth services?

- Patients registered with a practice who are participating in the MyMedicare program.
- The patient must be receiving the service through the practice where they are registered.

### Do I have to bulk bill the MyMedicare services?

- No, you don't have to bulk bill the MyMedicare services.
- However, the triple bulk bill incentive item can only be claimed where a service is bulk billed, the patient is registered for MyMedicare and is a child under 16, or is a pension or concession card holder.
- Further information on Commonwealth concession cards is available at [www.servicesaustralia.gov.au/concession-and-health-care-cards](http://www.servicesaustralia.gov.au/concession-and-health-care-cards).

### If my practice is using its own Medicare billing software, how can I check if my patient is eligible for MyMedicare before lodging a claim?

- You can access the Patient List to check if your patient is registered for MyMedicare.
- To access the Patient List from Health Professional Online Services (HPOS):
  - select My Programs tile
  - select MyMedicare tile
  - the Patient List will be displayed.
- You can also use the filters at the top the list to search for a patient, for example, by name or Medicare number/DVA file number.

### If I claimed the wrong incentive item when I could have claimed the new MyMedicare incentive, will the incentive we have claimed be paid or rejected?

- There are no changes being made to the claiming and payment parameters of the existing bulk billing incentive items. Therefore, if the provider was to claim the lower paying item (e.g. item 10990/10991) and the conditions advised within the item description are met, the bulk bill incentive will be paid on the lower paying item.
- If the provider later identifies the new, higher paying, bulk billing incentive item (e.g. item 75880) should have been claimed, the provider can request an adjustment in accordance with current Medicare practice.

### If I claim 2 incentives (for example, a 10990 and a 75880) which one will be paid?

- In this circumstance, if the items were submitted in the same claim, the higher paying bulk billing incentive item (e.g. 75880) will be paid, with the lower paying item (e.g. 10990) rejected.
- If the bulk bill incentive items aren't submitted in the same claim, the item submitted first will be paid. If this is the lower paying item (e.g. 10990), the provider may submit a request for adjustment in accordance with current Medicare practice.

### If I claim the service and forget to bill the incentive item, however, I am eligible for an incentive, is there a way I can claim the incentive by itself, or can this be done through the web services, or would it be a manual process?

- Where a provider omitted to submit a bulk bill incentive item as part of their claim and later identifies they were eligible to claim the bulk billing incentive, it's possible for a provider to claim the bulk billing incentive item only.
- The claiming of the bulk bill incentive item only is treated in the same way as any other claim, i.e. it can be submitted either manually or through a digital claiming channel.

### Are the new bulk billing incentive items applicable to DVA clients?

- The new bulk billing incentive items are claimable where a relevant clinical service has been provided to the eligible DVA client by a registered provider.

## Links

[Department of Health and Aged Care - Supporting Bulk Billing in General Practice](#)

[Department of Health and Aged Care - Billing Scenarios](#)

[MBS Online](#)

